

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

Please check the appropriate boxes:

Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):

The United States EAStern District Court of Michigan

 \Box Petitioner has **not** previously been granted leave to proceed in forma pauperis in any other court.

Petitioner's affidavit or declaration in support of this motion is attached hereto.

 \Box Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

The appointment was made under the following provision of law:

 \Box a copy of the order of appointment is appended.

or

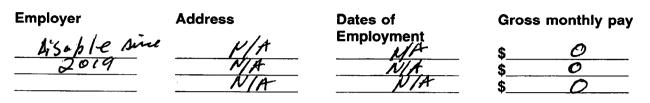
AFFIDAVIT OR DECLARATION IN SUPPORT OF MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS Werden Mary, am the petitioner in the above-entitled case. In support of

I, <u>IRVALLY</u>, an the petitioner in the above-entitled case. In support of my motion to proceed *in forma pauperis*, I state that because of my poverty I am unable to pay the costs of this case or to give security therefor; and I believe I am entitled to redress.

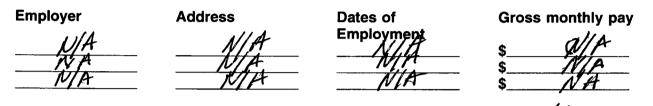
1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

	ge monthly amount during st 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$O	\$A	\$	\$_N/A_
Self-employment	\$O	<u>\$_NA</u>	\$0	\$_MA
Income from real property (such as rental income)	\$ <u>0</u>	\$/A	\$ <u>0</u>	\$/A
Interest and dividends	\$O	\$/A	\$ Ò	\$X
Gifts	\$	\$ <u>0</u>	\$ <u></u>	\$A
Alimony anones.	- ^{\$} _4446	\$ <u></u>	\$ <u></u>	\$ MA
Child Support	\$	\$ <u>0</u>	\$	\$_MA
Retirement (such as social security, pensions, annuities, insurance)	\$	\$́	\$	\$K
Disability (such as social security, insurance payments)	\$ 1300	\$A	\$ 1300	<u>\$_N/A</u>
Unemployment payments	\$ <u>0</u>	\$ <u>TV//</u>	\$ <u>D</u>	\$ D/A
Public-assistance (such as welfare)	<u>\$ EBT</u> Section de	\$ <u>N/A</u>	s EB7 sections	sA
Other (specify):	\$ <u>0</u>	\$	\$ <u></u> 70	\$
Total monthly income:	\$ <u> </u> 134	\$A	\$	s_MA

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)



3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

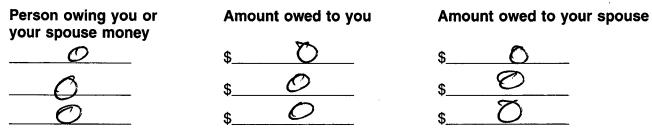


Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
Share	\$ 0	\$N/A
GO BBLUE Checkins	s	\$
University of Michiga	<i>د</i> \$	\$

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home don't own	□ Other real estate
ValueN/A	Value M/A
Don't own	□ Motor Vehicle #2
Year, make & model	Year, make & model
Value	Value
Description Umf?/ed	patent)
Value In Went From when	comparisated - ita
Worth is in the mill?	•

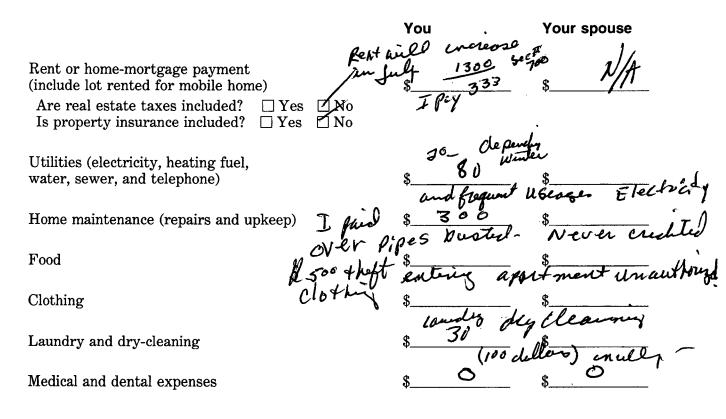
6. State every person, business, or organization owing you or your spouse money, and the amount owed.



7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

0 Name	Relationship	Age
Lozetta Gilson	EX - Wife	62
Natosha Chester	Daughter	18

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, or annually to show the monthly rate.



		Vou 5010 Card	Your spouse
Tra	nsportation (not including motor vehicle payment back onl forth to Lowsi	ts) <u>\$ Free</u> For Seniors	\$
Rec	peck on forth to Low	etc. \$	\$ 200 - in ag
	urance (not deducted from wages or included in n		Visity to
	Homeowner's or renter's	\$	por unlat
	Life	<u>\$ 34</u>	\$
	Health	\$	\$K/A
	Motor Vehicle	\$O	\$
	Other:	\$	\$//t
Tax	es (not deducted from wages or included in mort	gage payments)	• .4.
	(specify):	\$	<u>*/</u>
Inst	allment payments		
	Motor Vehicle	\$	\$N/A
	Credit card(s)	\$ 0	\$
	Department store(s)	\$	\$K
	Other:	\$ <u>0</u>	<u>\$</u>
Alin	nony, maintenance, and support paid to others	\$ 446	\$/A
Reg or fa	ular expenses for operation of business, professio arm (attach detailed statement)	n, <u>\$</u>	sNA
Othe	er (specify):	\$	\$
Tota	al monthly expenses: Marenay	> 440 > 4 1000- Cell	\$
	and cheld +	XFinity 74	
	\$ 300 year	Loundry 300 year	
	dy cleoning	200 year 200 year 100 year 100 year 100 year	year
	nonsportation Bens 14	chegonized by the for	*

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

my nent goes up on July 1, 2023.

10. Have you paid - or will you be paying - an attorney any money for services in connection with this case, including the completion of this form? \Box Yes \Box No

If yes, how much?

If yes, state the attorney's name, address, and telephone number:

11. Have you paid—or will you be paying—anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?

 \square Yes

If yes, how much? _____

If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I om disabled, on a fixed income, to pay out at least \$2000 four printing a Writ of cetiorari, and then vo copies will devistate any chance of attempting to file.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on: _______ 5, _____, 2023 Wend